

## **Minutes of the Health & Human Services Committee**

**Thursday, July 16, 2009**

Chair Paulson called the meeting to order at 1:00 p.m.

**Present:** Supervisors Duane Paulson (Chair), Bill Zaborowski, Gilbert Yerke, Jim Jeskewitz, Pauline Jaske, and Janel Brandtjen. **Absent:** Kathleen Cummings.

**Also Present:** Legislative Policy Advisor Ann Olson, Clinical Services Manager Mike DeMares, Health & Human Services Director Peter Schuler, Health & Human Services Deputy Director Don Maurer, Health & Human Services Board Member JoAnn Weidmann, Aging & Disability Resource Center Director Cathy Bellovary, Nutrition Services Supervisor Mary Smith, Senior Services Analyst Barbara Woyak, Senior Financial Analyst Clara Daniels, Long Term Care Programs Regional Director Gina Groskopf, Family Care Administrator Ann Lamberg, Family Care Administrator Barb Wollner, Family Care Officer Ed Kohl, Regional Director Jennifer Mathwig, Community Care Director of Operations Kelly Carter, Community Care Administrator Jane Connors, and Clinical Services Manager Mike DeMares. Recorded by Mary Pedersen, County Board Office.

### **Approve Minutes of 6-25-09**

MOTION: Brandtjen moved, second by Yerke to approve the minutes of June 25<sup>th</sup>. Motion carried 6-0.

### **Read Correspondence**

Paulson advised of a letter to Brandtjen from ProHealth Care who said they were pleased to be a sponsor of our pediatric immunization program and asked that an invoice be forwarded to them for \$4,900.

### **Schedule Next Meeting Dates**

July 30<sup>th</sup>

### **Announcements**

Schuler announced that Dr. Thomas Wilson, Clinical Director, is retiring today.

### **Update on AODA Programming**

DeMares advised of adjustments they will be making to the AODA Program. Due to an increase in detoxification expenses, they are expecting to be over budget by about \$300,000. Opiate detox/Suboxone is a voluntary program and those requesting opiate detox are not in a life threatening situation, unlike alcohol detox. To decrease expenses they had planned to stop paying for voluntary opiate detox/Suboxone and while devising this plan Waukesha Memorial decided not to offer detox at Lawrence Center, probably due to budgetary issues. Instead, these patients will be moved to Waukesha Memorial on an inpatient basis. DeMares noted inpatient treatment is not necessary for opiate detox. Instead, individuals with opiate problems who come through law enforcement, the courts, or overdose, and for our own clients who staff truly believe could benefit from opiate detox, will be provided treatment at the Mental Health Center. Those individuals requesting voluntary

opiate detox will be required to pay for their own treatment. DeMares added that very few insurance companies pay for opiate detox.

DeMares said the Suboxone program (opiates cessation) is currently being done at the Lawrence Center by Waukesha Memorial via contract. County doctors were recently trained in the delivery of Suboxone and are now in a position to provide this service. We also have adequate nursing and social work staff for the Suboxone aftercare and therapy programs. DeMares said we will no longer authorize Suboxone treatments at the Lawrence Center and will instead provide it ourselves, at significantly reduced costs. DeMares expects these changes will decrease our budget deficit to about \$150,000 and perhaps even less.

### **Discuss and Accept the 2008 Year-End Report of the Aging & Disability Resource Center (ADRC)**

Bellovary, Woyak, and Smith highlighted their year-end report as outlined. On April 1, 2008 the Department of Senior Services and the Department of Health & Human Services Long Term Care Division merged to become the ADRC. During 2008, the ADRC and former Department of Senior Services received 29,810 incoming requests for information and assistance, a 9.1% increase from 2007. The ADRC's Disability Benefit Specialists served 369 adults with disabilities. Top issues included Medicaid, Supplemental Security Income, and Social Security Disability. The ADRC's Elderly Benefits Specialists served over 504 older adults, an increase of 86.0% from 2007. Top issues included Medicare Parts D and C and Medicare Supplements. The number of meals delivered to frail and homebound older adults increased by 6.3% in 2008, with over 98,000 meals delivered. Two new shared-fare taxi companies began in 2008: All Day Taxi in the Waukesha area and Muskego Senior Tax serving the Muskego area. The services provided by these two companies plus one other in the Mukwonago area saw a 7.3% increase in the number of one-way trips in 2008. Volunteers contributed 37,373 hours to ADRC programs in 2008. Using minimal Waukesha County wage scales as a base, this equates to \$349,620. The Senior Dining Center and Home Delivered Meals programs accounted for 78.0% of the total volunteer hours served. In addition to volunteers and contracted service providers, the ADRC collaborated with many agencies in 2008 including The United Way, Catholic Charities, Waukesha Memorial Hospital, City of Waukesha Parks & Recreation, La Casa, Humane Animal Welfare Society, Harley Davidson Foundation, etc. The 2008 modified budget for the ADRC was \$5,228,442 including \$1,373,847 in County tax levy.

MOTION: Brandtjen moved, second by Jaske to accept the 2008 Year-End Report of the Aging & Disability Resource Center. Motion carried 6-0.

### **Update on the Senior Dining Program**

Bellovary and staff explained the consolidation of the home delivered meal sites. Bellovary distributed copies of a petition given to her from City of Waukesha Alderwoman Peggy Bull to use La Casa Village as the one congregate meal site. Smith said due to increased nutrition program usage, they received an additional \$25,000 for 2009 to keep the program whole while staff explored consolidating the City of Waukesha sites (Saratoga Heights, La Casa Village, and Willow Park). Saratoga Heights is open Monday through Friday and they serve about 25 congregate meals per day and about 65 home delivered meals per day. La Casa Village is open Mondays, Wednesdays, and Fridays. They serve about 15 to 20 meals per day and deliver about 65 meals per day. Willow Park is open Mondays, Tuesdays, and Thursdays. On Monday, Willow Park only serves congregate and

on Tuesdays and Thursdays, they do both congregate and home delivery. Willow Park and La Casa serve the same home delivered clients but on different days.

Smith indicated there has been tremendous growth in the program and they now serve about 125 home delivered meals per day in the City of Waukesha. There are space constraints at each meal site – the kitchens are very small and are not efficient. Currently, the food is prepared off-site by a contracted caterer and delivered to each of these locations in bulk. The Parks & Land Use Department recently used federal stimulus dollars to upgrade the Expo Center and the 2010 budget will include a proposal to consolidate the three sites and have the distribution site at the Expo Center. Ideally, they would like to find a new, central location in the City of Waukesha as the one dining site but this has been difficult, mostly due to space issues, which Smith explained further. Keeping three sites open would have a significant budget impact. No decisions have been made and discussions are ongoing. Paulson read aloud the petition from Alderwoman Bull. Paulson asked if there were any objections to the proposals presented today by staff and none were voiced.

Smith advised they are estimating a total of 101,000 home delivered meals for 2009 although they budgeted for 94,000. However, projections are good as the managed care organizations are purchasing meals from the County at full cost, significantly increasing our revenues.

Jeskewitz left the meeting at 3:30 p.m.

#### **Update on Care Wisconsin and Update on Community Care, Inc. Including the PACE and Partnership Programs**

Kohl and staff discussed their handout entitled “June 2009 Family Care Update.” All Family Care staff have completed a thorough training and education program focusing on methods to ensure the member’s involvement in the care planning process. Those present felt everything was going well so far. Kohl said for Family Care to continue to be sustainable, there needs to be a vibrant provider network combined with good care plans which can be challenging at times. Belovary said they are working through some issues with case managers relative to all the different providers, rate structures, etc. but there is a learning curve, especially for some of the smaller vendors. Groskopf said another challenge is with mental health crises and planning. They are currently trying to form a committee to address these issues which have reached extraordinary levels. Maurer touched on funding concerns and when eligibility for state funding ceases and it becomes a County funding issue. Kohl said financially, Family Care in Waukesha is doing “ok” compared to other counties and things are getting better, for all counties, due to better care plans and having better networks in place. Financially, the program/formula is working in Waukesha County whereby he advised of a \$444,000 gain. Groskopf said due to the economy, staffing shortages and turnover have not been an issue.

Community Care/Family Care enrollment as of July 1, 2009 included 149 frail elders, 64 adults with physical disabilities, and 308 adults with developmental disabilities. Each month a care management file audit report is completed for state contract requirements. There were a total of seven grievances filed in the 1<sup>st</sup> quarter of 2009, five of which were filed by Waukesha members. Most issues revolved around being dissatisfied with the care management team, usually resulting in a change of team, and most of the issues were resolved locally. Further training on the grievance process is planned for later this year. Concerns have been voiced from several providers regarding service authorization, claims payment, and contract negotiations. Meetings have been planned to

address these issues and this is still a work in progress. As of July 1, 2009 nine frail elders were enrolled in the Pace Program and two adults with physical disabilities were enrolled in the Partnership Program. Pace/Partnership teams are in the process of completing a "scorecard" for each team to monitor progress and quality, similar to Family Care. The provider network has really been the only challenge in Waukesha. With each new provider that is presented to Community Care, the provider management department works expeditiously to complete contracts so that members will continue to have a choice of providers. As the program continues to grow, so will the provider network.

MOTION: Jaske moved, second by Brandtjen to adjourn at 4:05 p.m. Motion carried 5-0.

Respectfully submitted,

Approved on:\_\_\_\_\_

Kathleen M. Cummings  
Secretary